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ABSTRACT

Demographic information, attitudes toward family planning and family planning agencies, fears of race genocide, and degree of race consciousness were elicited, by interviews, from a random sample of residents within several black communities of an urban area. A significant, positive relationship was found between race consciousness and the number of children desired, but not between race consciousness and agreement with the notion of family size limitation for black people generally. Moreover, reported use of birth control did not relate to race consciousness. Finally, race consciousness was not found to relate to endorsement of any of a series of statements concerning race genocide. An interpretive discussion indicates, among other things, the probable complex origins of race genocide fears. (Author/TL)

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ATTITUDES TOWARD FAMILY PLANNING AND FEARS OF GENOCIDE AS A FUNCTION OF RACE CONSCIOUSNESS

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ABSTRACT

A random sample (stratefied by income level) of residents within several black communities of an urban area were interviewed. The interview schedule contained items on demographic information, on attitudes toward family planning and family planning agencies, on fears of race genocide, and on race consciousness. A significant positive relationship was found between race consciousness and the number of children desired, but no relationship was found between race consciousness and agreement with the notion of family size limitation for black people generally. Moreover, reported use of birth control methods did not relate to race consciousness. Finally, race consicousness was not found to relate to endorsement of any of a series of statements referring to race genocide. These findings are interpreted in terms of: 1. the greater salience of ideology for personal decisions; and 2. the probable complex origins of race genocide fears.

ATTITUDES TOWARD FAMILY PLANNING AND FEARS OF GENOCIDE AS A FUNCTION OF RACE CONSCIOUSNESS[1]

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This paper is based on a pilot study preparatory to a larger project. The purpose of the study was to determine the relationship between race consciousness and: 1) attitudes toward family planning; and 2) fears of race genocide. Race consciousness here essentially refers to black consciousness, and it may be generally defined as positive identification with the physical and cultural aspects related to the black race.

Fear of race genocide (or black genocide) refers to the fear that there is a general plan or conspiracy aimed at the elimination of the black race.

From time to time there have been expressions from several quite varied sources suggesting that family plannning programs (in some or all of their practices) are forms (whether direct or indirect) of black genocide. Such expressions go back to Marcus Garvey (1967), who warned that the white race in this country might attempt in any number of ways to do to black people what it had done to the American Indian. E. Franklin Frazier

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(1933) attempted to study the suggestion that birth control would have a eugenic effect for black people. Beacuse census inspection indicated a decrease in the numbers of better educated blacks, he remained unconvinced of any such eugenic effect caused by birth control use.

More recently proponents of the idea of black genocide, in addition to citing historical and contemporary instances of the general physical and psychological brutalization of black people in American society, also point to reports of excessive sterilizations and proposals for significantly more involuntary sterilizations of indigent black women. One such proponent of the genocide notion, Dr. Charles Greenlee (1968), maintain that the black man's security in the United States lies in the strength of numbers.

Farley (1970), however, deduces from the increase in the use of birth control methods that up until now such genocide notions cannot be held by more than a small proportion of the black population. It should be pointed out that use of birth control methods in itself would not necessarily be a contraindication of a desire to have a large number of children. A woman may simply wish to delay or space the bearing of children, but intend to have many. The question that is critical, however, is whether the sense of identification with the needs of a group (race consciousness and the warding off of genocide) can actually be shown to relate to decision making processes concerning family planning.

By assessing race consciousness more directly we hoped to test the hypothesis that attitudes toward family planning are related to such race consciousness. A second hypothesis was that race consciousness would be related to fears of race genocide. The point is simply that a person who is highly race conscious may be inclined to see himself as living in a generally dangerous environment. It is difficult to say which would come first. That is, a person who sees himself as being in a dangerous environment may increase in race consciousness.

METHOD

Sample

Several black communities in a medium-sized New England city were identified. Using census data and street lists it was possible to classify several of these communities in terms of average income level. Two simple categories were used in the classification: middle to upper income communities and lower income communities.

For the middle to upper income communities a 40 persent random sample of households was initially designated; a 60 percent sample of households in lower income communities was designated. A 2.5 persent random sample was then drawn from these designated households. This sampling procedure was used in order to provide an approximately stratified sample by income.

Procedure

Ten interviewers obtained 159 usable interviews. The interview schedule included items concerning general information,

attitudes toward family planning, fears of racial genocide, and attitudes about several other more general issues. In this study a putative measure of race consciousness was used. Each respondent was asked to designate the racial identifying term which he (or she) preferred from among these: Colored, Negro, Afro-American, and Black. A survey of contemporary thought and popular literature led us to the assumption that the degree of race consciousness increases as one proceeds from Colored to Black.

RESULTS

Of those interviewed 66 percent were female. The median age for the females was 27, and for males it was 30. The range for both sexes went from middle teens to early fifties. The median educational attainment was high school graduation.

First, notice that in Table 1 the preferences for racial names were collapsed into two categories: 1. Black and Afro-American; and 2. Negro, Colored, and those who had no preference. (We assumed that those who expressed no preference could be considered to be displaying a lack of race consciousness.) The need for this collapsing was due in part to the relatively small total sample in this pilot study. It was needed also because the frequencies for each of the designations except Black were relatively small: Colored (6.29%), Negro (15.09%), Afro-American (8.81%), and "no preference" (4.40%).

Of the several items which we considered to be indices of attitude towards family planning, two showed a statistically significant relation to race consciousness. The first: "How

many additional children do you wish?" (χ^2 = 5.1, $p<.05$). (Perhaps this index shoulc more appropriately be called a measure of attitude toward family size limitation.)

A second item (see Table 2) showing a statistically significant relationship with race consciousness might most specifically be considered an indication of attitude toward family palnning programs. This item--"Birth control clinics operated by blacks will be more acceptable to blacks than if operated by whites"--received significantly more agreement among those preferrring Black or Afro-American as racial names (χ^2 = 9.38, $p<.01$).

No statistically significant relationships were found between race consciousness and the following items which were also aimed at attitudes toward family planning:

1. Have you ever been to a clinic or private doctor to obtain formation about not becoming pregnant?
2. Black Americans should not attempt to limit their family size.
3. An abortion is one of the best ways of controlling births.
4. Being sterilized is an acceptable method of birth control.
5. Birth control projects are aimed at the low income population rather than the middle and upper income groups.

The second hypothesis of the study--that there would be a relationship between race consciousness and fears of race genocide--was tested by relating the preferred race name to a series

of "agree-disagree" items. Race consciousness was not found to be related at a statistically significant level for any of the follwing items which were attempting to assess fears of genocide. (Simply as a way for the reader to get a general picture of the extent of endorsement in the sample, the percentage of the total groups agreeing with the statement is presented after each.)

1. As the need for cheap labor goes down there will be an effort to reduce the number of black Americans. (28%)
2. As black Americans increase their demands for civil rights there will be an effort to rid the country of American blacks. (42%)
3. The assasination of black leaders is an indication of the white effort to eliminate blacks. (43%)
4. Encouraging American blacks to use birth control is comparable to trying to eliminate this group from society. (28%)
5. Abortions are a part of a white plot to eliminate blacks. (22%)
6. Sterilization is a white plot to eliminate blacks. (17%)
7. All forms of birth control methods are designed to eliminate black Americans. (14%)

DISCUSSION

There is minimal support in this study for the hypothesis that race consciousness would be related to attitudes toward family planning. It is interesting that neither of the items which were found to be related to race consciousness are pure

measures of positive-to-negative attitudes toward family planning as such. On the basis of the first we must conclude tentatively that the level of race consciousness is related to individuals' personal decisions about family size. However, apparently it does not relate to the stance on family planning which they think that the group as a whole should take. This seems somewhat paradoxical because race consciousness is inherently a group referent and one might reasonably expect that it would be translated into implications for how one thinks the reference group does or should respond. However, one might simply interpret the finding in terms of the greater salience of ideology for such personal decisions than for general attitudes.

The second item which was found to be significantly related to race consciousness--"Birth control clinics operated by blacks will be more acceptable to blacks than if operated by whites"--might lead one to conclude that in addition to the absolute value placed on family planning one must add the racial consideration. The item may reasonably be considered an item aimed at family planning attitudes since the respondent who endorses it is in essence saying that he sees a connection between race and the acceptability of family planning organizations and programs.

Finally, the interpretation of the lack of significant relationship between genocide and race consciousness must be based on a reference to the probable complex origins of those fears. That is, a person may be basing his fears on: 1. personal experiences; 2. on identification with a group which holds that view; or 3. on a general ideology concerning the relationship between

blacks and whites. This interpretation would suggest that, because fears of genocide can arise from such varied sources, individuals at any level of race consciousness might have such fears--but for many different reasons, some of which have little to do with ideology.

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TABLE 1

FREQUENCIES AND PERCENTAGES OF

RESPONDENTS BY RACE CONSCIOUSNESS

AND DESIRED NUMBER OF CHILDREN

	RACIAL DESIGNATION PREFERENCE		
Desired Number Of Children	Negro, Colored, and No Preference	Black or Afro-American	Total
0 - 2	21 (60%)	40 (49%)	61 (52%)
3 or more	14 (40%)	42 (51%)	56 (48%)
Total	35	82	117

TABLE 2

FREQUENCIES AND PERCENTAGES OF RESPONDENTS

BY RACE CONSCIOUSNESS LEVEL AND RESPONSE

TO: "Birth control clinics operated

by Blacks will be more acceptable"

Response	NEGRO, COLORED OR NO PREFERENCE	BLACK or AFRO-AMERICAN	Total
AGREE	15 (47%)	80 (73%)	95 (68%)
DISAGREE	17 (53%0	26 (27%)	43 (32%)
TOTAL	32	106	138